

| CLAIMS ONLY | | | | | | Application Number 09/864,857 | Filing Date | | |
|--------------|----------------------|--------|-----------------------|--------|------------------------|----------------------------------|---|--|--|
| | | | | | | Applicant(s) | | | |
| CLAIMS | AS FILED 10-18-04 | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | * May be used for additional claims or amendments | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | 10-18-04 | | |
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| Total Claims | | | | | | Total Claims | | | |

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/864857
FILING DATE

10-18-04

CLAIMS

10-18-04

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|----------|------------------------|----------|------------------------|----------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 101 | 1 | | | | | |
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| 131 | 1 | | | | | |
| 132 | 1 | | | | | |
| 133 | 2 | | | | | |
| 134 | 2 | | | | | |
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| 138 | 2 | | | | | |
| 139 | 2 | | | | | |
| 140 | 2 | | | | | |
| 141 | 2 | | | | | |
| 142 | 2 | | | | | |
| 143 | 2 | | | | | |
| 144 | 2 | | | | | |
| 145 | 1 | | | | | |
| 146 | 2 | | | | | |
| 147 | 2 | | | | | |
| 148 | 2 | | | | | |
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| 150 | 2 | | | | | |
| TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | ████████ | | ████████ | | ████████ |

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|----------|------------------------|----------|------------------------|----------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 151 | 2 | | | | | |
| 152 | 2 | | | | | |
| 153 | 2 | | | | | |
| 154 | 2 | | | | | |
| 155 | 2 | | | | | |
| 156 | 2 | | | | | |
| 157 | 2 | | | | | |
| 158 | 2 | | | | | |
| 159 | 2 | | | | | |
| 160 | 2 | | | | | |
| 161 | 2 | | | | | |
| 162 | 3 | | | | | |
| 163 | 2 | | | | | |
| 164 | 2 | | | | | |
| 165 | 2 | | | | | |
| 166 | 2 | | | | | |
| 167 | 2 | | | | | |
| 168 | 3 | | | | | |
| 169 | 2 | | | | | |
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| TOTAL IND. | 5 | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | 127 | ← | | ← | | ← |
| TOTAL CLAIMS | 132 | ████████ | | ████████ | | ████████ |